

KENTUCKY BOARD OF NURSING
312 Whittington Parkway, Suite 300
Louisville, Kentucky 40222-5172
<http://kbn.ky.gov>

ADVISORY OPINION STATEMENT

CARDIOPULMONARY/RESPIRATORY NURSING PRACTICE

Introduction

The Kentucky Board of Nursing is authorized by Kentucky Revised Statutes (KRS) Chapter 314 to regulate nurses, nursing education and practice, and to issue advisory opinions on nursing practice, in order to assure that safe and effective nursing care is provided by nurses to the citizens of the Commonwealth.

The Kentucky Board of Nursing issues advisory opinions as to what constitutes safe nursing practice. As such, an opinion is not a regulation of the Board and does not have the force and effect of law. It is issued as a guidepost to licensees who wish to engage in safe nursing practice.

Accountability and Responsibility of Nurses

KRS 314.021(2) holds nurses individually responsible and accountable for rendering safe, effective nursing care to clients and for judgments exercised and actions taken in the course of providing care.

KRS 314.021(2) imposes individual responsibility upon nurses. Acts which are within the permissible scope of practice for a given licensure level may be performed only by those licensees who personally possess the education and skill proficiency to perform those acts in a safe, effective manner.

Nursing practice should be consistent with the *Kentucky Nursing Laws*, established standards of practice, and be evidence based.

Respiratory Nursing Practice

The Board has received multiple inquiries on the role, utilization and scope of practice for both the registered nurse and the licensed practical nurse in the provision of cardiopulmonary/respiratory care for clients with altered or potential for altered cardiopulmonary function. In addition, inquiries have been received requesting the Board to consider the overlap in the provision of respiratory care by both nurses and respiratory care practitioners¹.

¹ Respiratory care practitioners are governed by the Kentucky Board of Respiratory Care (KBRC). For information on certification requirements, educational preparation, and scope of practice of respiratory care practitioners, please contact the KBRC, Frankfort, Kentucky.

In 1990, KRS Chapter 314A was enacted governing respiratory care practitioners; defining the "practice of respiratory care"; establishing a respiratory care practitioner scope of practice, and a statutory provision that "nothing in this section shall limit, preclude, or otherwise restrict the practices of other licensed personnel in carrying out their duties under the terms of their license." Subsequently, an overlap exists in the provision of respiratory care by nurses, respiratory care practitioners, and other health care providers.

Advisory Opinion

After review of the statutes governing nursing practice, curricula of prelicensure and continuing education nursing programs, standards of nursing practice, and study of the issues and concerns regarding the provision of cardiopulmonary care, the Kentucky Board of Nursing issued this advisory opinion statement.

KRS 314A.010(2) defines the practice of respiratory care. Much of what is included in this definition is a part of nursing practice pursuant to KRS 314.011(6) registered nursing practice and/or KRS 314.011(10) licensed practical nursing practice. (See section entitled "Applicable Statutes", page 4). While the definitions of nursing practice do not contain a specific list of procedures and practice functions, the definitions are stated in broad, comprehensive language and do include the provision of nursing care for clients with altered cardiopulmonary function.

I. Advanced Registered Nursing Practice

It is within the scope of the advanced registered nurse practitioner (ARNP) qualified by education, experience, and current clinical competence, to manage acute and chronic cardiopulmonary problems and/or provide primary healthcare services to clients with altered or potential for altered cardiopulmonary function in accordance with 201 KAR 20:057 Scope and standards of practice of ARNPs. The ARNP may also perform acts within the scope of registered nursing practice.

II. Registered Nursing Practice

It is within the scope of registered nursing practice for a registered nurse, qualified by education, experience, and current clinical competence to provide care to clients with altered or potential for altered cardiopulmonary function including care of clients with a nursing diagnosis² including but not limited to the following:

- Ineffective airway clearance
- Ineffective breathing patterns
- Impaired gas exchange
- Altered tissue perfusion

²Carpenito, Lynda Juall, *Nursing Diagnosis: Application to Clinical Practice*, 3rd edition, J B Lippincott Co., Philadelphia, 1989.

Further, it is within the scope of registered nursing practice for a registered nurse qualified by education, experience, and current clinical competency to provide nursing interventions³ including but not limited to the following:

- Promotion of acid-base balance and prevention of complications resulting from acid-base imbalance.
- Collection and analysis of client data to regulate acid-base balance.
- Insertion and/or assisting with insertion and stabilization of an artificial airway.
- Facilitation of patency of air passages.
- Removal of airway secretions via suctioning.
- Artificial airway management.
- Aspiration precautions.
- Limitation of complications resulting from an imbalance between myocardial oxygen supply and demand.
- Promotion of balance of oxygen consumption and supply.
- Chest physiotherapy.
- Optimization of hemodynamic regulation.
- Measurement and interpretation of invasive hemodynamic parameters/monitoring.
- Use of an artificial device/mechanical ventilation to assist clients with breathing.
- Mechanical ventilatory weaning.
- Oxygen therapy.
- Respiratory monitoring.
- Chest tube care.

It is also within the scope of registered nursing practice for the registered nurse qualified by education, experience, and current clinical competency to serve in a clinical case manager role for clients with altered cardiopulmonary function.

III. Licensed Practical Nursing Practice

It is within the scope of licensed practical nursing practice for the licensed practical nurse, qualified by education, experience, and current clinical competence, to provide components of care, under the delegation and supervision of a registered nurse, to clients experiencing altered or a potential for altered cardiopulmonary function, including but not limited to the following:

Participation with a registered nurse in the assessment, planning, intervention, and evaluation of a client's nursing care.

Performance of acts as taught in prelicensure practical nurse education programs, including but not limited to: oxygen therapy, oral/nasal, pharyngeal, tracheal and endotracheal suctioning, administration of aerosol and inhalant medications, and maintenance of oral/nasal airway.

³McCloskey, Joanne, and Gloria Bulechek, (eds.), *Nursing Interventions Classification (NIC)*, Mosby Year Book, St. Louis, 1992.

V. RN/LPN Educational Preparation and Institutional Policy

Nurses are responsible for having documented evidence of adequate educational and experiential preparation to perform cardiopulmonary nursing practice in a safe, effective manner. Such preparation should include supervised clinical practice, and where applicable, technical management of equipment. Specific educational preparation should be acquired in an approved prelicensure education program and/or through successful completion of continuing education course(s).

In addition, nurses should perform procedures(s) in accordance with the established written agency policies and procedures, which are consistent with the scopes and standards of practice as stated in KRS 314.011(6) and (10).

IV. Resources

A collaborative role between nurses and other healthcare providers is essential in the delivery of safe, effective healthcare. Further, the provision of safe, effective healthcare is contingent upon the availability of an adequate number of personnel with sufficient resources who are able and qualified to carry out clinical judgment activity at a level consistent with meeting a client's care needs in a safe manner. Respiratory care practitioners are clearly recognized as qualified personnel who serve as major resources in providing care to meet the specialized respiratory needs of clients.

In summary, cardiopulmonary care is an integral part of the healthcare rendered to clients and is one component of a client's plan of care. Cardiopulmonary care is within the scope of practice of registered nurses (components are within the scope of practice of licensed practical nurses) and may be provided by nurses who are educationally and experientially prepared to provide such care in a safe, effective manner. It is recognized that cardiopulmonary/respiratory care is practiced by respiratory care practitioners pursuant to KRS Chapter 314A, but this practice does not restrict the practice of nurses in this arena. It is also recognized that elements of cardiopulmonary care may also be practiced by other qualified healthcare providers within the limits of their scope of practice and applicable licensure.

Determining Scope of Practice

In addition to this advisory opinion statement, the Kentucky Board of Nursing has published "Scope of Practice Determination Guidelines" which contains a decision tree chart providing guidance to nurses in determining whether a selected act is within an individual nurse's scope of practice now or in the future. A copy of the guidelines may be purchased from the Kentucky Board of Nursing office or downloaded from the KBN website at <http://kbn.ky.gov>.

Applicable Statutes⁴

KRS 314.021(2) states:

All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience in nursing.

⁴ "A copy of the *Kentucky Nursing Laws* may be purchased from the Kentucky Board of Nursing office.

KRS 314.011(2) defines "delegation" as:

... Directing a competent person to perform a selected nursing activity or task in a selected situation under the nurse's supervision and pursuant to administrative regulations promulgated by the board in accordance with the provisions of KRS Chapter 13A.

KRS 314.011(8) defines "advanced registered nursing practice" as:

... The performance of additional acts by registered nurses who have gained added knowledge and skills through an organized postbasic program of study and clinical experience and who are certified by the American Nurses' Association or other nationally established organizations or agencies recognized by the board to certify registered nurses for advanced nursing practice. The additional acts shall, subject to approval of the board, include, but not be limited to, prescribing treatment, drugs, devices, and ordering diagnostic tests. Advanced registered nurse practitioners who engage in these additional acts shall be authorized to issue prescriptions for and dispense nonscheduled legend drugs as defined in KRS 217.905, under the conditions set forth in KRS 314.042. Nothing in this chapter shall be construed as requiring an advanced registered nurse practitioner designated by the board as a nurse anesthetist to obtain prescriptive authority pursuant to this chapter or any other provision of law in order to deliver anesthesia care. The performance of these additional acts shall be consistent with the certifying organization or agencies' scopes and standards of practice recognized by the board by administrative regulation.

KRS 314.011(6) defines "registered nursing practice" as:

...The performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:

- a) The care, counsel, and health teaching of the ill, injured or infirm.
- b) The maintenance of health or prevention of illness of others.
- c) The administration of medication and treatment as prescribed by physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:
 - 1. Preparing and giving medication in the prescribed dosage, route, and frequency, including dispensing medications only as defined in subsection (17)(b) of this section;
 - 2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
 - 3. Intervening when emergency care is required as a result of drug therapy;
 - 4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
 - 5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
 - 6. Instructing an individual regarding medications.
- d) The supervision, teaching of, and delegation to other personnel in the performance of activities relating to nursing care.
- e) The performance of other nursing acts which are authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.

KRS 314.011(10) defines "licensed practical nursing practice" as:

...The performance of acts requiring knowledge and skill such as are taught or acquired in approved schools for practical nursing in:

- a) The observing and caring for the ill, injured, or infirm under the direction of a registered nurse, a licensed physician, or dentist.
- b) The giving of counsel and applying procedures to safeguard life and health, as defined and authorized by the board.
- c) The administration of medication or treatment as authorized by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board which is consistent with the National Federation of Licensed Practical Nurses or with Standards of Practice established by nationally accepted organizations of licensed practical nurses.
- d) Teaching, supervising, and delegating except as limited by the board.
- e) The performance of other nursing acts which are authorized or limited by the board and which are consistent with the National Federation of Licensed Practical Nurses' Standards of Practice or with Standards of Practice established by nationally accepted organizations of licensed practical nurses.

KRS 314.101(3) states: "Nothing in this chapter shall limit, preclude, or otherwise restrict the practices of other licensed personnel in carrying out their duties under the terms of their licenses."

Similarly, KRS 314A.105(2) states: "Nothing in this section shall limit, preclude, or otherwise restrict the practices of other licensed personnel in carrying out their duties under the terms of their licenses."

Approved: 2/93
Revised: 2/05